

Our system is not a failure. The dramatic decline in deaths from heart disease is salient evidence for the phenomenal success of technologically advanced American medical care for those who can afford it. Our problem is a failure of distribution, a failure to extend care to all of those who need it and a failure to recognize the importance of applying scientific rigor to the problems of broad-based health care delivery. If state-of-the-art American medicine were offered to our citizens in a comprehensive way, our levels of public health would be unexcelled.

Like education (also, in important ways, not a business), the public health is a national investment and a crucial one. Could we justify a "privatized" educational system that denied access to slower learners unable to pay—i.e., the children who need help the most? When you consider that we spend more on leisure than on health care (22 percent more just on recreation, restaurant meals, tobacco and foreign travel), is the percentage of the GNP we spend on health care really so inappropriate?

The failure in distribution of health care is the product of our tacit acquiescence in the notion that health care access rightly depends on ability to pay. This idea has become, for many, a point of philosophical and ideological zeal.

It is long past time we acknowledged that broad-based access to health care will be an exceedingly expensive proposition. We must rid ourselves of the delusion that it is a business, like any other business.

The problem can be fixed. Forming a public consensus on this matter is a mighty and politically perilous challenge, requiring leadership and the courage to state that adequate health care is an appropriate goal for this country and a vital national investment. These are, indeed, treacherous waters. Can we get away from the clichés about "socialized medicine" and the hackneyed references to overly bureaucratized, centralized, inefficient postwar European health systems?

As world leaders in science, business and organizational management, we are capable of something new. We should maintain our commitment to the advancement of biomedical science for the public good and couple it with the management skills that have created our vibrant, competitive economy, and apply both in creating a national policy of investment in health.

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PERSONAL EXPLANATION

HON. XAVIER BECERRA

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, May 6, 1999

Mr. BECERRA. Mr. Speaker, due to a commitment in my district on Wednesday, May 5, 1999, I was unable to cast my floor vote on rollcall numbers 108 through 115. The votes I missed include rollcall vote 108 on Approving the Journal; rollcall vote 109 on Ordering the Previous Question; rollcall vote 110 on the Hyde amendment to H.R. 833, the Bankruptcy Reform Act; rollcall vote 111 on the Moran

amendment to H.R. 833; rollcall vote 112 on the Conyers amendment to H.R. 833; rollcall vote 113 on the Watt amendment to H.R. 833; rollcall vote 114 on the Nadler substitute amendment to H.R. 833; and rollcall vote 115 on passage of H.R. 833.

Had I been present for the preceding votes, I would have voted "yes" on rollcall votes 108, 110, 111, 112, 113, and 114. I would have voted "no" on rollcall votes 109 and 115.

PRIVATIZATION: THE WRONG PRESCRIPTION FOR MEDICARE

HON. FORTNEY PETE STARK

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, May 6, 1999

Mr. STARK. Mr. Speaker, several Members have touted the idea that Medicare should be turned over to the private sector. Although they say that privatization will save the program, their true motivation is to irreparably damage Medicare to the point that there is nothing left to salvage. In the words of former speaker Newt Gingrich, they want Medicare to "wither on the vine."

Republicans have always intended to destroy Medicare. While they have found new ways to disguise their message over the years, their intention remains the same: get government out of health care no matter what the cost. "Privatization" is just another one of their ploys.

The truth is that the private sector cannot provide high quality health services to disabled and elderly Americans. Especially not at a lower cost.

Medicare was originally created to fill in the gap of health insurance coverage for older Americans, and later the disabled. Before Medicare, the private sector either refused to provide insurance coverage to the elderly, or made the coverage so expensive that seniors could not afford to pay the premiums. Lack of health coverage meant having to pay for health care out of their limited retirement incomes. This left many elderly poverty stricken.

Today the health coverage problem for older Americans is getting worse, not better. The fastest growing number of uninsured are people age 55–62, an even younger group than when Medicare was first established. Rather than extending coverage to this uninsurable group, Republicans insist on doing nothing, even though the President's Medicare early-buy proposal would have cost nothing.

Why should we believe that private sector insurers will put their financial interests aside and compete to provide coverage for an older, sicker population when evidence suggests that they will not? Especially as costs for the chronically ill continue to rise.

Republicans have also claimed that the private sector will save money for Medicare. This is simply not true. Over the past thirty years, Medicare's costs have mirrored those of FEHBP and the private sector, even though Medicare covers an older, sicker population. Recent evidence shows that private sector costs are now rising faster than Medicare's.

Last fall Medicare+Choice plans abandoned 400,000 Medicare beneficiaries claiming that the Medicare rates were too low to cover this population. This suggests that health plans will charge ever more than we currently pay them, not less.

Privatizing Medicare will not improve quality, either. Paul Ellwood, the "father of managed care," recently stated that the private sector is incapable of improving quality or correcting for the extreme variation in health services across the country and that government intervention is necessary and inevitable. In his words, "Market forces will never work to improve quality, nor will voluntary efforts by doctors and health plans. . . . Ultimately this thing is going to require government intervention." Why would we want to encourage more people to enroll in private health plans given the managed care abuses igniting the Patient's Bill of Rights debate?

Medicare is the primary payer for the oldest elderly, chronically ill, disabled, and ESRD patients—all very complex and expensive groups to care for. Private managed care plans, which primarily control costs by restricting access to providers and services, simply do not meet the health care needs of everyone in this population. For the most part, Medicare+Choice plans have enrolled only the healthiest beneficiaries, while avoiding those most in need of care. There is no way of knowing whether or not private health plans are able to provide quality care to the sickest population.

Medicare beneficiaries will have significant difficulties making decisions in a market-based system. This is potentially the most disastrous consequence of moving to a fully privatized Medicare program. Many Medicare beneficiaries are cognitively impaired. Thirty percent of Medicare beneficiaries currently enrolled in managed care plans have low health literacy. That is they have difficulty understanding simple health information such as appointment slips and prescription labels. Now we've discovered that health plans often fail to provide critical information to potential enrollees. How can we expect senior citizens and the disabled to participate as empowered consumers in a free-market health care system, especially without essential information?

Medicare reform cannot be based solely on private sector involvement. More than 11 million Medicare beneficiaries—30% of the population—live in areas where private health plans are not available, and because of the limited number of providers probably never will be available. A comprehensive, viable, nationally-based fee-for-service program must be maintained for people who either cannot afford to limit their access to services in private managed care plans, or who are incapable of participating in a free market environment.

Unfortunately the debate surrounding privatizing Medicare is grounded in ideology, not fact. While I understand the need to improve and expand the choices available to Medicare beneficiaries—the Medicare+Choice program was created in recognition of this—we also have an obligation to preserve the promise of guaranteed, affordable health insurance for the people who need it most. The private sector is not a panacea for our problems. Historical experience proves that alternative solutions are necessary for our elderly and disabled citizens. Before we move to an entirely new system, we should attempt to improve the existing infrastructure, one that has served elderly and disabled citizens effectively for over thirty years.

ARIZONA ANTI—DEFAMATION
LEAGUE HONORS DANIEL R. ORTEGA, JR.

HON. ED PASTOR

OF ARIZONA

IN THE HOUSE OF REPRESENTATIVES

Thursday, May 6, 1999

Mr. PASTOR. Mr. Speaker, I rise before you today to proudly bring tribute to a fellow Arizonan who has long exemplified the meaning of leadership, community, and good citizenship. He is a well-respected leader in Arizona and Phoenix, and someone whom I'm proud to call my friend—Mr. Daniel R. Ortega, Jr.

In my home state, Danny recently received the Leader of Distinction Award from the Arizona Region of the Anti-Defamation League. This award was established to honor extraordinary individuals for their successful professional and philanthropic achievements. It recognizes people who have truly made a difference in the lives of Arizonans through their strength, courage, creativity, individuality and motivation, whether professionally or in their personal pursuits.

I can attest that Danny is one of the most revered individuals in Phoenix when it comes to community. He has been a dauntless voice, particularly for the Latino community, when no other voice was there to champion their causes. Whether he is fighting for the rights of migrant farm workers, advising elected officials on community issues, or advocating for his clients, he has guided decision-making with wisdom and moral purpose.

An attorney by profession, Danny has served on the board of directors of numerous national organizations. He sits on the boards of the Federal Home Loan Bank of San Francisco, National Council of La Raza, and the Los Abogados Hispanic Bar Association. He also serves on the disciplinary Commission of the Arizona Supreme Court, and is a member of the Stewardship Board for the Roman Catholic Church of Phoenix. He is a member of the Arizona State Bar, American Trial Lawyers Association as well as the American and Maricopa County Bar Associations.

Previously, he was a member of the Board of Directors of the Mexican American Legal Defense and Education Fund, the Arizona Trial Lawyers Association, Valley of the Sun United Way, Arizona State Alumni Association and Chicanos Por La Causa, Inc. He also served on the Arizona Industrial Commission, the Phoenix Aviation Advisory Board, the Maricopa County Commission on Trial Court Appointments and Arizona State Bar Peer Review Committee.

Danny is a 1974 graduate of Arizona State University with a Bachelor of Arts degree in political science. He received his Juris Doctor degree in 1977 from ASU's College of Law. Before going into private practice, he was an attorney with Community Legal Services in Phoenix. Currently, as a partner with the law offices of Ortega & Associates, P.C., he provides legal services in the area of civil litigation, personal injury law, employment law, and government and non-profit agency representation. Mr. Ortega primarily concentrates in the litigation of personal injury and employment matters.

Danny is the oldest of eight children born to Elvira and Daniel Ortega Sr., both of whom ingrained a deep sense of family and commu-

nity into their children. He has served as a volunteer in many campaign positions including field operations, fund-raising, finance and campaign chair.

Mr. Speaker, as you can surmise, Danny Ortega is an exemplary leader and a profoundly committed individual who is a true role model for the nation. He has effected change that has improved the lives of and broken down barriers for many Arizonans. Therefore, I am pleased to pay tribute to my friend Danny Ortega, and I know my colleagues will join me in thanking him and wishing him great success.

IN RECOGNITION OF VIRGINIA K. GRIFFIN

HON. ROB PORTMAN

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Thursday, May 6, 1999

Mr. PORTMAN. Mr. Speaker, I rise today to thank and recognize my friend, Virginia Griffin, for her 32 years of gracious public service to the city of Cincinnati, especially to the children of Cincinnati. After 32 years as an elected member of the Cincinnati school board, Mrs. Griffin had decided to retire so she can devote more time to her family. Although her decision to step down is understandable, her departure will create a void that will be very difficult to fill.

A product of the Cincinnati public schools herself, Mrs. Griffin was first elected to the school board in 1967. She led the district through many tumultuous issues, including a contentious desegregation lawsuit shortly after her election, countless curriculum changes, and numerous levy campaigns.

In the early 1980's, she played a key role in the development of the magnet school program to promote both racial balance and innovative, high-quality educational programming. She also is rightfully proud of the district's first alternative school—the German language academy. She has been a staunch protector of the district's magnificent art collection. She led the changes to keep this historic and unique resource intact. In fact, one of her last acts as a member of the school board was to make the Cincinnati Art Club in Mount Adams the caretaker of the collection.

Her expertise in legislative and financial matters over the years made Mrs. Griffin an invaluable member of the Board, and it is in these areas that her departure will be most felt.

Mr. Speaker, Virginia Griffin represents the best of public service. She served the city, especially its schoolchildren, with dignity during her 32 years of service. She deserves our thanks for a lifetime of work well done.

CRISIS IN KOSOVO—REMARKS BY ADM. EUGENE CARROLL

HON. DENNIS J. KUCINICH

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Thursday, May 6, 1999

Mr. KUCINICH. Mr. Speaker, on April 21, 1999, I convened the first in a series of Congressional Teach-In sessions on the Crisis in

Kosovo. If a peaceful resolution to this conflict is to be found in the coming weeks, it is essential that we cultivate a consciousness of peace and actively search for creative solutions. We must construct a foundation for peace through negotiation and mediation, and through honest diplomacy.

Part of the dynamic of peace is a willingness to engage in meaningful dialogue, to listen to one another openly and to share our views in a constructive manner. I hope that these Teach-In sessions will contribute to this process by providing a forum for Members of Congress and the public to explore alternatives to the bombing and options for a peaceful resolution. We will hear from a variety of speakers on different sides of the Kosovo situation. I will be introducing into the CONGRESSIONAL RECORD transcripts of their remarks and essays that shed light on the many dimensions of the crisis.

First is a presentation by Admiral Eugene Carroll, USN (Ret) who now serves as the Deputy Director of the Center for Defense Information (CDI). Adm. Carroll analyzes the stated objectives of the bombing of Serbia and whether the exercise of military power is capable of realizing those objectives. He also discusses the fundamental character of the Rambouillet plan that was presented to Mr. Milosevic, and the importance of Russian intervention in achieving a durable resolution to the crisis. I commend this excellent presentation to my colleagues.

PRESENTATION BY ADMIRAL EUGENE CARROLL,
USN (RET) TO CONGRESSIONAL TEACH-IN ON
KOSOVO—APRIL 21, 1999

The conventional wisdom is that war is much too important to be left to generals and admirals. As a result, in a democratic society, the question of going to war and the objectives to be sought in a war are political responsibilities. The objectives are defined in political terms. It is very important at this point that the objectives be attainable by military force. The two must match. And the objective must merit the use of this blunt, destructive, indiscriminate process we call war. The outcome, the achievements, must outweigh the damage and destruction and loss occasioned by the war.

Looking at Kosovo we find that the objectives have been a little hard to nail down. But two of them stand out. Deter and degrade the ability of Serbian forces to effect ethnic cleansing in Kosovo. And, to compel Serbian compliance with the Rambouillet plan. The first objective, the protection of the Kosovars, was never obtainable by the means employed. The air war cannot protect these abused people. It is impossible to control military and political conditions on the ground with air power alone. The power, the authority, on the ground will control the situation. There is so much evidence of this that it is simply undeniable. We have the ability to punish, we can destroy, we can kill. But to control the situation, and protect the Kosovars? No. The means of air warfare alone did not match the objective. What does the destruction of the Socialist Party headquarters in Belgrade do to mitigate the conditions of Kosovars in Kosovo?

The second objective, namely compelling compliance with the Rambouillet plans, was also unattainable by air power. Rambouillet was a demand for total capitulation by the Milosevic government. The capitulation did not just apply in Kosovo. I don't think this is entirely understood. It was far broader than that. Appendix B of the Rambouillet plan spelled out the problem this way. "NATO personnel shall enjoy together with